

SHOREVIEW

Farmers Market



2021 Indoor Farmers' Market Application

Tuesday's | 4:00 pm – 7:00 pm
November 9 & 23 | December 7 & 21

Mail Application To:

City of Shoreview | Indoor Farmers Market
Attn: Market Manager
4580 Victoria Street North, Shoreview, MN 55126
OR
Email: sschutta@shoreviewmn.gov

1. Applications not filled out completely will not be considered and returned back to applicant
2. Only one applicant per household will be allowed. Any household applying under multiple names will not be considered.
3. Full payment must be submitted with this application. If vendor is not accepted into the Market a full refund will be submitted back to vendor.

Each Vendor will be provided with one 8ft table & two chairs.

Deadline for completed applications	
Market – November 9	October 29
Market – November 23	November 12
Market – December 7	November 29
Market – December 21	December 10

Once a vendor is accepted, the fee is non-refundable.

You are being asked to supply certain information about yourself that may be private information. The requested information may be used by the Farmers Market staff, Parks and Recreation department and other City of Shoreview employees as reasonably necessary. The purpose of this requested information is to compile a list to allow the City to contact you with information regarding your status as a vendor, market related updates/questions, weather related closures, etc. Failure to supply the requested data may result in the delay of the City supplying you with information or acceptance of your application.

Contact Information:

Business/Farm Name: _____

Primary Seller Name (First/Last): _____

List additional sellers and indicate relationship to primary seller:

Name of additional seller	Relationship to primary seller

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Farm, Garden, or Business Address (if different from above): _____

Business/Home Phone: (_____) _____ Cell Phone: (_____) _____

E-Mail: _____ Website: _____

MN Sales Tax ID Number (if applicable): _____

Nature of Business – I am a/an (check the appropriate boxes below):

Farmer, I produce (please check all that apply):

☐ Fruits and/or Vegetables☐ Meat, Dairy, and/or eggs☐ Grains and or legumes☐ Nursery Plants☐ Certified Organic (attach copies of certification documents)☐ Other (please specify): _____

Do you grow/produce ALL your items?

• Yes

• No

If no – please explain _____

Do you require electricity? **(Additional \$5 per market day)**

• Yes

• No

****You must provide your own extension cord. ****

Are you selling any canned/processed food items?

• Yes

• No

If you sell meat, where is the meat processed? _____

List any food related licenses you currently hold? _____

Additional licensing from Ramsey County Department of Health may be required to participate in the market. Please, contact them at 651-266-1199 to ensure that you are fully licensed.

Attendance Dates: Indicate **ALL** days you will be attending the market.

2021	
<input type="checkbox"/> November 9 (\$20)	<input type="checkbox"/> December 7 (\$20)
<input type="checkbox"/> November 23 (\$20)	<input type="checkbox"/> December 21 (\$20)

Vendor Publicity:

We want to promote our vendors! We are always updating our website, marketing materials, newsletters, and planning out new forms of promotions for the Farmers' Market. Please, check the pieces of information below that you would like to share with the public.

We will not share any information that is not checked below.

- | | |
|---|--|
| <input type="checkbox"/> Your Farm or Business name | <input type="checkbox"/> Your Email Address |
| <input type="checkbox"/> Your Farm or Business location | <input type="checkbox"/> Your Farm or Business website |
| <input type="checkbox"/> Your Phone Number | <input type="checkbox"/> Your Social Media Accounts/Page |

Product Availability List:

Please list all items intended to sell at the market. Add an additional page if necessary. Items not listed may not be sold. If application is accepted, any additions to items sold must be submitted in writing and cannot be sold until approved by market staff.

Please check:

- ☐ I have read and agree to abide by all City of Shoreview 2021 Indoor Farmers Market guidelines and rules.
- ☐ I understand that, once I receive written confirmation of my acceptance, the season fee is non-refundable.
- ☐ I agree that the City of Shoreview are not liable for any injury, illness, theft, loss, or damage of any kind to either the buyer or seller, or their property, arising out of or pertaining to preparation for, participation in, or use or consumption of products bought, sold, or provided at the Shoreview Farmers Market.
- ☐ I understand that it is recommended that I carry my own general liability and product liability insurance as the City of Shoreview does not provide this coverage.
- ☐ The City of Shoreview takes pictures and videos of people participating in/attending the Shoreview Farmers Market for use in marketing and promotional purposes. I grant permission to use the name, pictures, videos and quotes of my employees and me for this purpose.

The following forms are REQUIRED to complete the application:

- ☐ Completed Application
- ☐ MN Department of Revenue Form ST-19
- ☐ Copy of General Liability Insurance
- ☐ Photo of your booth/product/display (New Applicants Only)

*Please keep in mind that incomplete information or failure to include all forms could delay your acceptance. Incomplete applicants will be returned in their entirety to the vendor.

Primary Seller Signature

Date